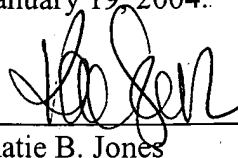


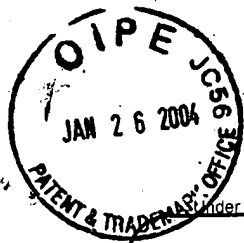


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A handwritten signature in black ink, appearing to read "Katie B. Jones", written over a horizontal line.

Katie B. Jones



|   |                      |                        |             |
|---|----------------------|------------------------|-------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/721,953             |             |
|   | Filing Date          | 11/25/2003             |             |
|   | First Named Inventor | Brenkus                |             |
|   | Art Unit             |                        |             |
|   | Examiner Name        |                        |             |
| Total Number of Pages in This Submission  | 119                  | Attorney Docket Number | CFLAY.00219 |

| ENCLOSURES (Check all that apply)   |  |   |
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| <input type="checkbox"/> Fee Transmittal Form:<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to a Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1. Certificate of Mailing; and<br>2. Postcard Receipt. |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                  |
|--|------------------|
| Firm or Individual                         | William S. Wang  |
| Signature                                  |                  |
| Date                                       | January 19, 2004 |

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